\$ 2171



Patent Attorney's Docket No. <u>032969-001</u>

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re P	atent Application of	)				
Urban	LINDH	Group Art Unit: 2171				
Applica	ation No.: 09/834,909	Examiner: Wayne Amsbury				
Filed:	April 16, 2001	Confirmation No.: 5416				
For:	DISPLAY OF PATENT INFORMATION	SEP 0 3 2003 Technology Center 2100				
	AMENDMENT/REPLY TR	ANSMITTAL LETTER				
P.O. B	ssioner for Patents ox 1450 dria, VA 22313-1450					
Sir:						
En	closed is a reply for the above-identified pate	ent application.				
[X	A Petition for Extension of Time is also enclosed.					
[ ]	A Terminal Disclaimer and the [] \$55.00 (2814) [] \$110.00 (1814) fee due under 37 C.F.R \$1.20(d) are also enclosed.					
[ ]	Also enclosed is/are	Also enclosed is/are				
[ ]	Small entity status is hereby claimed.	Small entity status is hereby claimed.				
[ ]	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the [ ] \$375.00 (2801) [ ] \$750.00 (1801) fee due under 37 C.F.R. § 1.17(e).					
	[ ] Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.					
	[ ] Applicant(s) previously submitted requested.	_, on, for which continued examination is				
	does not exceed three months from t	he filing of this RCE, in accordance with fee under 37 C.F.R. § 1.17(i) is enclosed.				

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[]	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a
	(1809/2809) is also enclosed.

[X] No additional claim fee is required.

[ ] An additional claim fee is required, and is calculated as shown below:

		AMENDED	CLAIMS	S	2 28 28 80 22 2
	No. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADD'L FEE
Total Claims		MINUS =		× \$18.00 (1202) =	
Independent Claims	,	MINUS =		× \$84.00 (1201) =	
If Amendment adds mu	ltiple depend	lent claims, add \$28	0.00 (1203)		
Total Claim Amendmer	nt Fee				
If small entity status is	claimed, sub	tract 50% of Total C	Claim Amendr	nent Fee	
TOTAL ADDITIONA	L CLAIM F	EE DUE FOR TH	S AMENDM	ENT	

[X] A total fee in the	amount of \$110.00	is enclosed.
[ ] Charge \$	to Deposit Accoun	t No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: August 29, 2003

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